Department of Health Services See Instructions on Back of Page 6 Toxic Substances Control Division State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91) and Front of Page 7 Sacramento, California Please print or type. (Form designed for use on elite (12-pitch typewriter). 2. Page 1 1. Generator's US EPA ID No. Manifest Information in the shaded areas UNIFORM HAZARDOUS Document No. is not required by Federal law. WASTE MANIFEST CAD 0091640 310 A. State Manifest Document Number 3. Generator's Name and Mailing Address 8867 EATON CORP 1640 MONROVIA BLVD.., COSTA MESA, CA 4. Generator's Phone (714642-2427 C. State Transporter's ID US EPA ID Number 5. Transporter 1 Company Name D. Transporter's Phone 13 CAD) 42 245 001 OMEGA RECOVERY SERVICES 1-800-852-E. State Transporter's ID US EPA ID Number 7. Transporter 2 Company Name F. Transporter's Phone G. State Facility's ID US EPA ID Number 9. Designated Facility Name and Site Address 10. CADP 14 12 12 14 5 10 10 1 OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD 698-0991 213 CAD 042 245 001 WHITTIER, CA 13. Total 14. Unit 12. Containers Waste No. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) No. Туре UN 2831 WASTE 1,1,1, TICHLOROETHANE ORM-A **EPA/Oth** 15/15/16/16 UN 2831 WASTE FLAMMABLE LIQUID N.O.S UN 1993 EPA/Other PAINT RELATED MATERIAL (PAINT THINNER) State WASTE FLAMMABLE LIQUID N.O.S FPA/Other (WASTE OIL) 0101 CENTER EPA/Other ng Codes for Wastes Listed Above RESPONSE J. Additional Descriptions for Materials Listed Above 01 01 C. 01 NATIONAL 15. Special Handling Instructions and Additional Information A-13500, A-15708 PROFILE NUMBERS CALL THE GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. SPILL. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to meand that I can afford. 8 EMERGENCY Printed/Typed Name 17. Transporter 1 Acknowledgement of Receipt of Materials Day Year Month Signature ¥ Printed/Typed Name YERNANDEZ 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name 19. Discrepancy Indication Space

C L

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Do Not Write Below This Line

Printed/Typed Name

FRANK FORD

Signature

FINAL

Signature

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To: P.O. Box 3000, Sacramento, CA 95812

Month Day Year

DHS 8022 A (1/88)

EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.